

WELSH INFORMATION STANDARDS BOARD

DSC Notice:	DSCN 2011 - 07
Date of Issue:	14 th September 2011

Ministerial / Official Letter: Referral to Treatment (RTT) Guidance (Richard Bowen, 14 th September 2011) Delivering Improved Compliance Against Waiting Time Standards (Paul Williams, 25 th October 2010)	Subject: The introduction of the 'Referral to Treatment Times (Combined)' return
Sponsor: Richard Bowen – Director of Operations Department for Health, Social Services & Children Welsh Government	
Implementation Date: October 2011 submissions (for data relating to September 2011)	

DATA SET CHANGE NOTICE

A Data Set Change Notice (DSCN) is an information mandate for a new or revised information standard.

This DSCN was approved by the Welsh Information Standards Board (WISB) on the 5th September 2011

WIGSB Reference: IGRN 2011 / 020

Summary:

To introduce the Referral to Treatment Times (RTT) (Combined) return to:

- Include the 'main' Referral to Treatment Times;
- Include the Cardiac Referral to Treatment Times;
- Include a sub set of the Diagnostic & Therapy Waiting Times;
- Introduce the data item 'Stage of Pathway';
- Formalise a change to the submission date.

Data sets / returns affected:

Referral to Treatment Times
Cardiac Referral to Treatment Times

Please address enquiries about this Data Set Change Notice to the Data Standards Team in
NHS Wales Informatics Service:

E-mail: data.standards@wales.nhs.uk / Tel: 029 2050 2539/2540

The Welsh Information Standards Board is responsible for appraising information standards. Submission documents and WISB Outcomes relating to the approval of this standard can be found at:

<http://howis.wales.nhs.uk/sites3/page.cfm?orgid=742&pid=24632>

DATA SET CHANGE NOTICE

Introduction

In November 2006, Welsh NHS Trusts were instructed to supply information on Cardiac Total Waiting Times in order to support the Service and Financial Framework (SaFF). These have subsequently been used to monitor a series of Annual Operating Framework (AOF) targets. The targets specified that all patients referred by a GP or other medical practitioner to adult secondary or tertiary cardiology would receive definitive treatment within 32 weeks of receipt of the original referral by the receiving Trust. Trusts were required to submit their Cardiac RTT return to the Business Service Centre Information Department (now part of the NWIS) no later than 20 days after the end of the reporting period.

The RTT information flow ('main' RTT) was introduced in April 2007 to assist in monitoring the Welsh Assembly's commitment that no patient in Wales would wait more than 26 weeks from GP referral to treatment. The RTT return has previously been submitted to the NHS Wales Informatics Services (NWIS) on the 25th calendar day of every month by Welsh Local Health Board (LHBs) / Trusts. In January 2011, it was informally agreed to bring forward the submission date of this return to 10th working day each month.

The collection of Diagnostic & Therapy waiting times reporting was originally introduced in April 2003. This covers all waiting times for a specific range of Diagnostics and Therapy services at any stage in a patient's care pathway. These have historically been excluded from the 'main' RTT return and have only been reported separately.

In its role of working with LHBs in ensuring achievement of RTT targets, the Delivery & Support Unit (DSU) has collected additional data, including the "stage of pathway" that patients were on at the time of the monthly census.

The changes to the RTT returns described in this DSCN relate to combining the 'main' RTT and Cardiac RTT returns, adding a subset of the Diagnostic & Therapy Waiting Times and adding Stage of Pathway into a single monthly 'RTT (Combined)' return.

The rules applying to "clock starts" and "clock stops" for the 'main' and Cardiac RTT returns have been different since their inception. For instance, a patient transferring to a different provider for a continuation of their wait for treatment would have their clock stopped and restarted for Main RTT but the clock would continue for the Cardiac RTT until eventual commencement of treatment, wherever that occurred. These differing business rules remain unchanged. Historically, RTT has been focussed on capturing waiting times in respect of referrals to consultants only. However, the introduction of a subset of the Diagnostic & Therapy Waiting Times means that this business rule has now changed, as referrals to other non-consultant clinical staff are now in scope of the combined return.

The original RTT guidance (WHC (2006) 081) specifically advised that non-consultant referrals for a diagnostic or Allied Health Professional (AHP) intervention, which preceded the consultant referral, were out of scope and, as such, should not be included within the reported referral to treatment times. However, as advised in Paul Williams' letter dated 25th October 2010, waits for a diagnostic or AHP intervention with a source of referral other than a consultant that initiate a new pathway are now to be included when reporting Referral to Treatment Times. The Diagnostic and Therapies Waiting Times return is unaffected by these changes.

Historically, Referral to Treatment Times have been reported using 'Main Specialty (of Consultant)' to identify the consultant care for which a patient is awaiting treatment. However, due to the changing management of referrals in secondary care, such as the use of

pooled specialty waiting lists and the fact that referrals are now often directed to a specialty or service rather than a named individual, this is no longer appropriate. Therefore, in the new RTT (Combined) return, the data item Treatment Function Code is to be used to capture the specialty under which a patient is currently being treated or is waiting to be treated. The data item 'Local Sub Specialty' is also to be included initially in the new return in order to distinguish between adult and paediatric cardiology referral to treatment times.

NWIS (Mold office) currently receives monthly patient-level data covering Welsh residents treated in England from a range of English NHS organisations for the purposes of reporting 'main' and Cardiac RTT. Arrangements for the provision of this data have been agreed between the DSU and individual English NHS organisations. The patient-level data is reformatted by NWIS into two aggregate returns – the 'main' RTT and Cardiac RTT returns.

The new RTT (Combined) data return will be submitted via the [NHS Wales Data Switching Service \(NWDSS\)](#)¹, with associated data quality checking taking place using the [Validation at Source Service \(VASS\)](#)². Both of these systems are developed and maintained by NWIS.

Description of Change

To combine the reporting of 'main' and Cardiac Referral to Treatment Times, to include waits for a subset of the Diagnostic & Therapy Waiting Times and to add the data item 'Stage of Pathway'.

- The new "combined" return will include the data items:
 - Referring Organisation Code
 - Previously reported in the Cardiac RTT return but not in the 'main' return.
 - Stage of Pathway
 - An entirely new data item (see further comments below).
 - Treatment Function Code
 - Replaces the data item 'Main Specialty (of Consultant)'.
- The definition of Treatment Function Code now includes a significant amount of additional information associated to reflect the requirement to report RTT waits for diagnostic (998) and Allied Health Professional (AHP) (999) services in the new RTT (Combined) return.
- The new data submission timescales (i.e. report by 5pm on the 10th working day of each month) are formalised via this DSCN.
- Timescales associated with the provision of a data return for Welsh residents treated (or waiting for treatment) in English PCTs are specified.
- Service Delivery & Performance Division have confirmed that there is no requirement for LHBs to report waits for English residents treated (or waiting for treatment) in Welsh LHBs / Trusts.

Scope of Return

The new RTT (Combined) return now includes:

- All waits previously reported within the 'main' RTT return;

¹ <http://nwdss.hsw.wales.nhs.uk/NwdssMerge/default.aspx>

² <http://nwdss.hsw.wales.nhs.uk/NwdssMerge/VASS/>

- All waits previously reported within the 'cardiac' RTT return;
 - Both of these will already include patients on a pathway but awaiting a diagnostic or AHP service intervention or result.
- All waits for pre-consultant referrals (e.g. referrals from a GP) to diagnostic and AHP services, as largely included in the monthly Diagnostic and Therapies (DaTs) return – i.e. the following Diagnostic / AHP services are to be excluded:
 - Arts Therapies;
 - Occupational Therapy – Learning Difficulties / Mental Health;
 - Speech & Language – Learning Difficulties / Mental Health.
- All waits associated with referrals to an AHP service from a consultant specialty where clinical responsibility for the patient has been transferred to the AHP service.
- Waits associated with Mental Health specialties remain **out of scope** for the RTT (Combined) return.

Stage of Pathway

- Pre-existing definitions of 'Stage of Pathway' were found **not** to be mutually exclusive and lacked clarity in respect of diagnostic intervention waits – be that admitted or pre-consultant.
- Historically, 5 stages have been collected via the DSU 'Stage of Pathway' return, the 4th and 5th stages aimed to distinguish between patients waiting for diagnostic admissions and therapeutic admissions. This distinction is often not known (e.g. endoscopy activity), therefore a single stage of pathway – waiting for an admitted diagnostic OR therapeutic intervention - has been proposed.

Data Dictionary Version

This DSCN will be reflected in version 3.4 of the NHS Wales Data Dictionary.

Actions Required

Actions for Local Health Boards / Trusts:

- From October 2011, submit and sign off monthly, the RTT (Combined) return to NWIS by 17:00 on the 10th working day of the month in accordance with the instructions set out in this DSCN. The first submission of the new return (September 2011 data) is due by Friday 14th October 2011.
- Retrospective corrections to submitted data are routinely permissible via the submission of a separate data return for the month preceding the current reporting month only.
- Discontinue the submission of separate monthly 'main' and Cardiac RTT to NWIS / Health Statistics & Analysis Unit and the 'Stage of Pathway' report to DSU.
- Continue to submit the monthly Diagnostic & Therapies Waiting Times return.

Actions for the NHS Wales Informatics Service (NWIS):

- Update the [NHS Wales Data Switching Services \(NWDSS\)](#) and relevant infrastructure to enable the collection, storage, onward distribution and analysis of the RTT (Combined) data return.
- Update [Validation at Source Service \(VASS\)](#)³ to allow for the submission of the RTT (Combined) return, to include the introduction of new data validity checks for the data items 'referring organisation code' and 'stage of pathway'.
- Continue to receive and process RTT data provided by NHS England organisations. Patient-level data provided to NWIS should be re-formatted into the agreed file structure and formally submitted via the [NWDSS](#) by 17:00 on the 10th working day of the month in accordance with the instructions set out in this DSCN.
- Submit monthly rolling two-month extracts of RTT data to the Health Statistics & Analysis Unit, Welsh Government by the 12th working day of the month.

Actions for the Health Statistics & Analysis Unit, Welsh Government:

- Update data collection and validation systems to allow for the publication of RTT (Combined) data in the new format.

³ <http://nwdss.hsw.wales.nhs.uk/NwdssMerge/VASS/>

Appendix A: Table reflecting areas that are impacted as a result of this DSCN

The following table shows all the data sets, data items, terms and other associated areas that are linked with the changes documented within this DSCN.

Each data definition type is listed in alphabetical order and is shown in the sequence in which it appears in this DSCN.

<u>Data Definition Type</u>	<u>Name</u>	<u>New / Retired / Changed</u>	<u>Page</u>
Aggregate Data Set	Cardiac Referral to Treatment Times	Retired	8
Aggregate Data Set	Cardiac Referral to Treatment Times – Details of Return	Retired	8
Aggregate Data Set	Referral to Treatment Times	Retired	9
Aggregate Data Set	Referral to Treatment Times – Details of Return	Retired	9
Aggregate Data Set	Referral to Treatment Times (Combined)	New	10
Aggregate Data Set	Referral to Treatment Times (Combined) – Details of Return	New	10
Data Item	Count	Changed	12
Data Item	Data Reference	Changed	12
Data Item	Local Sub Specialty	Changed	14
Data Item	Main Specialty (of Consultant)	Changed	15
Data Item	Organisation Code (Code of Provider)	Changed	16
Data Item	Organisation Code (LHB Area of Residence)	Changed	17
Data Item	Referring Organisation Code	Changed	18
Data Item	Return Date	Changed	19
Data Item	Stage of Pathway	New	20
Data Item	Treatment Function Code	Changed	21
Data Item	Weeks Wait	Changed	23
Term	Diagnostic Intervention	New	27
Term	Therapeutic Intervention	New	27
Appendix	Appendix A – Specialty Codes For General Use (Numerical) – Local Sub Specialty Codes	Changed	28
Appendix	Appendix A – Specialty Codes For General Use (Numerical) – Other	Changed	28

Appendix B: Highlighted changes to be made to the NHS Wales Data Dictionary

Changes to the NHS Wales Data Dictionary are detailed below, with new text being highlighted in **blue** and deletions are shown with a ~~strikethrough~~. The text shaded in **grey** shows existing text copied from the NHS Wales Data Dictionary.

Changes to Aggregate Data Sets

Cardiac Referral to Treatment Times (Retired)

Valid From: 1st April 2009

Valid To: 31st August 2011

This return was discontinued following its merger with the Referral To Treatment (RTT) Times and the addition of Diagnostic & Therapy Waiting Times and Stage of Pathway details to form the Referral to Treatment Times (Combined) return, effective from October 2011.

[Cardiac Referral to Treatment Times - Details of Return \(Retired\)](#)

See [Referral to Treatment Times \(Combined\)](#)

Cardiac Referral to Treatment Times – Details of Return

(Retired)

Field Order	Format
Data Reference	2 alpha characters
Return Date	ccyymmdd
Organisation Code (LHB Area of Residence)	3 alpha numeric characters
Organisation Code (Code of Provider)	3 alpha numeric characters
Referring Organisation Code	3 alpha-numeric characters
Weeks Wait	Alpha Numeric
Count	Numeric

** If the count is zero for a month wait time band, a row for that week's wait's data need not be submitted.*

The number of patients waiting each number of weeks is entered in the 'count' field. The Business Service Centres will provide data sets to Health Statistics & Analysis Unit, WAG by the last working day of the month after the reporting period. To enable the BSC to meet this timetable, Local Health Boards /Trusts should submit data to the BSC local office no later than 20 days after the end of the reporting period.

Return Details for Local Health Boards/ Trusts:



All files should be sent in the form of a comma separated text file (csv format) to the BSC by the 20th day of the month and e-mailed to:

Files should be named as: CRTTxxxmmmyy.csv

Where:

xxx = the Local Health Board/ Trust Code

mmm = first three letters of the month to which the data relates

yy = last two digits of the year

Return Details for the Business Service Centres:

All files should be sent in the form of a comma separated text file (csv format) to HSA by the 25th day of the month and e-mailed to: stats.health@wales.gsi.gov.uk

Files should be named as: CRTTxxmmyy.csv

Where:

xx = the last two numbers of the BSC code

mmm = first three letters of the month to which the data relates

yy = last two digits of the year

Referral to Treatment Times (Retired)

Valid From: 1st April 2007

Valid To: 31st August 2011

This return was discontinued following its merger with the Referral To Treatment (RTT) Times and the addition of Diagnostic & Therapy Waiting Times and Stage of Pathway details to form the Referral to Treatment Times (Combined) return, effective from October 2011.

[Referral to Treatment Times -Details of Return \(Retired\)](#)

See [Referral to Treatment Times \(Combined\)](#)

Referral to Treatment Times – Details of Return (Retired)

Field Order	Format
Data Reference	2 alpha characters
Return Date	ccyymmdd
Organisation Code (LHB Area of Residence)	3 alpha numeric characters
Organisation Code (Code of Provider)	3 alpha numeric characters
Main Specialty (Consultant)	3 digit numeric
Weeks Wait	Alpha Numeric
Count	Numeric

All returns are to be sent in the form of a comma separated text file (csv format), i.e. in which the values in each field are separated by commas. There will be no header record.

The return should be named as:

xxxmmmyy.csv

where: xxx = the Local Health Board/ Trust code
mmm = first three letters of the month to which the data relates, e.g. Apr for the first submission of data relating to waiting times at end April.
yy = last 2 digits of the year

The return should be sent via the secure upload mechanism located on <http://nwdss.hsw.wales.nhs.uk/>

Each time a return is submitted, Local Health Boards /Trusts should complete a HSW submission form and send it via e-mail to Waitingtimes@wales.nhs.uk with a subject heading of 'Referral to Treatment Times'.

Returns should be sent to reach HSW on the 25th day of the month or the next working day. From 1st April 2008, the inclusion of the Local Health Board is mandated.

Only include RTT waits for elective specialty services available in your Local Health Board/ Trust. If your Local Health Board/ Trust provides a service but there are no patient's with neither open or stop clocks, a zero should be placed in the zero week wait time band and the LHB field should be left blank.

Referral to Treatment Times (Combined)

Valid From: 1st September 2011

See [Referral to Treatment Times \(Combined\) – Details of Return](#)

Referral to Treatment Times (Combined) – Details of Return

Field Order	Format
Data Reference	2 alpha characters
Return Date	ccyymmdd
Organisation Code (LHB Area of Residence)	3 alpha numeric characters
Organisation Code (Code of Provider)	3 alpha numeric characters
Referring Organisation Code	3 alpha-numeric characters
Treatment Function Code	3 digit numeric
Local Sub Specialty Code	3 digit numeric
Stage of Pathway	1 digit numeric
Weeks Wait	Alpha Numeric
Count	Numeric

All returns are to be sent in the form of a comma separated text file (csv format). There will be no header record.

The return should be named as:



xxxmmmyy.csv

where:

xxx = the Local Health Board / Trust code.

mmm = first three letters of the month to which the data relates, e.g. Apr for the submission of data relating to waiting times at end April.

yy = last 2 digits of the year.

Each file may contain RTT data relating to one month only – i.e. contain data relating to one return (or census) date only. Resubmissions are routinely permissible for the month proceeding the current reporting month only and should be submitted separately.

The return should be sent via the secure upload mechanism located on the NHS Wales Data Switching Service (NWDSS) – <http://nwdss.hsw.wales.nhs.uk/>.

Returns should be submitted monthly and signed off in the NHS Wales Data Switching Service by Local Health Boards / Trusts by 17:00 on the 10th working day of the month.

The 26 week Referral to Treatment Time target is applicable to Welsh residents only. Therefore, there is no requirement to submit Referral to Treatment Times for English patients being treated (or waiting for treatment) in Welsh LHBs.

Where LHBs / Trusts provide specialty services for which there are no waits to report, they are not required to include a count for that specialty. However, if the Local Health Board / Trust provides a zero open or closed pathway count for any specialty, the Organisation Code (Code of Provider), Treatment Function Code and Local Sub Specialty Code fields should be populated as normal and:

- CP or OP may be submitted in the Data Reference field, depending on the data reference where the zero count is applicable;
- X98 should be submitted in the Organisation Code (LHB of Residence) field;
- X98 should be submitted in the Referring Organisation Code field;
- A '9' should be submitted in the Stage of Pathway field;
- A zero should be submitted in the zero Weeks Wait time band;
- A zero should be submitted in the Count field.

For Welsh residents treated (or waiting for treatment) in England:

NWIS is routinely provided with data for Welsh residents being treated (or waiting for treatment) in England. This data is initially supplied monthly by a number of English NHS organisations. NWIS is required to collate these individual returns into a single aggregate return and upload via the NHS Wales Data Switching Service – <http://nwdss.hsw.wales.nhs.uk/>.

NWIS will provide monthly data extracts of Welsh residents treated (or waiting for treatment) in English NHS organisations to each LHB / Trust. LHBs / Trusts are required to validate their data and agree their data to be reported centrally with NWIS by the 8th working day of the each month. NWIS is then required to submit a single all-Wales return monthly, which should be signed off in the NHS Wales Data Switching Service by 17:00 on the 10th working day of each month.

Each monthly return should relate to data for the reporting period one month previous to the current reporting month – e.g. in June, data for Welsh residents treated (or waiting for treatment) in England in April should be submitted.

Changes to Data Items

Count

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
DT Waiting Times		
RTT	1 st April 2007	31 st August 2011
PP01W		
RTT-PTR	1 st September 2009	30 th September 2009
CRTT	1 st April 2009	31 st August 2011
Angiogram	1st December 2008	1 st April 2010
RTT (Combined)	1st September 2011	

This is the numeric field showing number of patients in each time band.

For DT, RTT (Combined) and PP01W, see [Weeks Wait](#)

For RTT-PTR See [Time Band Relating to Breach Date](#)

Data Reference

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
DT Waiting Times		
RTT	1 st April 2007	31 st August 2011
PP01W		
RTT-PTR	1 st September 2008	30 th September 2009
CRTT	1 st April 2009	31 st August 2011
Angiogram	1 st December 2008	1 st April 2010
RTT (Combined)	1st September 2011	

This defines the record type within a return. Must be one of the following:

For Diagnostic and Therapy Services Waiting Times: -

Format: 2 character alpha

Value	Return Type	Valid From	Valid To
IE	Inpatient Diagnostic Endoscopy		
DE	Day Case Diagnostic Endoscopy		
OE	Outpatient Diagnostic Endoscopy		
DT	For all other specified Diagnostic and Therapy Services		

For Referral to Treatment Times (Retired): -

Format: 2 character alpha

Value	Return Type	Valid From	Valid To
PO	Open Pathway	1 st April 2007	31 st August 2011
CA	Closed Pathway Due to Admission	1 st April 2007	31 st August 2011
CO	Closed Pathway Due to Other Clock Stop Point	1 st April 2007	31 st August 2011

For PP01W:-

Format: 2 character alpha

Value	Return Type	Valid From	Valid To
IP	Inpatient Admission		
DC	Day Case Admission		
OP	First Outpatient Appointment		

For Referral to Treatment Patient Tracking Report (Retired):-

Format: 2 character alpha

Value	Return Type	Valid From	Valid To
BU	Patients on RTT pathways for whom a decision to admit or to commence treatment has not been made (i.e. Unknown)	1 st September 2008	30 th September 2009
BD	Patients on RTT pathways for whom a decision for treatment has been made but have an appointment date which is scheduled beyond their breach date.	1 st September 2008	30 th September 2009

For Cardiac Referral to Treatment Times (Retired):-

Format: 2 character alpha

Value	Return Type	Valid From	Valid To
OP	Open Pathway	1 st April 2009	31 st August

			2011
CP	Closed Pathway	1 st April 2009	31 st August 2011

For Referral to Treatment Times (Combined):-

Format: 2 character alpha

Value	Return Type	Valid From	Valid To
OP	Open Pathway	1 st September 2011	
CP	Closed Pathway	1 st September 2011	

For Angiogram (Retired):-

Format: 2 character alpha

Value	Return Type	Valid From	Valid To
IA	Inpatient Admission	1 st December 2008	1 st April 2010
DA	Day Case Admission	1 st December 2008	1 st April 2010

Local Sub Specialty

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 st April 1999	
EAL ds	1 st April 1999	
OP ds	1 st April 1999	
PP01W		
RTT (Combined)	1 st September 2011	

This is a locally or nationally defined division of clinical work which may cross specialty boundaries.

Format: 3 character alpha-numeric

Treatment Function Code	Local Sub Specialty Code	Valid From	Valid To
NNN Any	000 No appropriate sub-specialty 666 Assessment Unit	1 st May 1998 1 st April 2009	

160 Plastic Surgery	100 Plastic Surgery (non burns) 166 Plastic Surgery (non burns) ASSESSMENT 200 Burns Surgery 266 Burns Surgery ASSESSMENT	1 st May 1998 1 st April 2009 1 st May 1998 1 st April 2009	
170 Cardiothoracic Surgery	100 Cardiac Surgery 166 Cardiac Surgery ASSESSMENT 200 Thoracic Surgery 266 Thoracic Surgery ASSESSMENT 300 Paediatric Cardiac Surgery 366 Paediatric Cardiac Surgery ASSESSMENT	1 st May 1998 1 st April 2009 1 st May 1998 1 st April 2009 1 st May 1998 1 st April 2009	
320 Cardiology	100 Paediatric Cardiology 166 Paediatric Cardiology ASSESSMENT	1 st May 1998 1 st April 2009	
400 Neurology	100 Spinal Injuries 166 Spinal Injuries ASSESSMENT 900 Other Neurology 966 Other Neurology ASSESSMENT	1 st May 1998 1 st April 2009 1 st May 1998 1 st April 2009	

This local sub specialty code is a separate field, rather than an extension.

For Referral to Treatment Times (Combined):-

- Local Sub Specialty must always be submitted, noting that '000' means no appropriate Local Sub Specialty;
- Codes for "Assessment" activity (i.e. 666, 166, 266, 366 and 966) are not permissible in the RTT (Combined) return.

Main Specialty (consultant)

(This data item was formerly known as 'Specialty Function Code' with the new title being implemented from 15th May 2006)

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 st April 1999	
EAL ds	1 st April 1999	
OP ds	1 st April 1999	
RTT	1 st April 2007	31 st August 2011
PP01W		
OPR ds	1 st July 2008	
RTT-PTR	1 st September 2008	30 th September 2009

This is the main specialty of the Consultant. It is a unique identifier for a specialty function. A specialty function is a division of clinical work to a lower level than that designated by Royal Colleges and Facilities.



Format: 3 digit numeric

See [Appendix A](#)

Organisation Code (Code of Provider)

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 st April 1999	
EAL ds	1 st April 1999	
OP ds	1 st April 1999	
CC ds	1 st April 2007	
OPR ds	1 st July 2008	
DATS		
RTT	1 st April 2007	31 st August 2011
RTT-PTR	1 st September 2008	30 th September 2009
PP01W		
EDDS	1 st April 2009	
RTT (Combined)	1 st September 2011	

This is the organisation code of the health care provider. The provider code identifies the health care provider who is responsible for managing the treatment of the patient.

Notes:

1. Healthcare providers may also act as commissioners when sub-contracting patient care services to other providers of health care.
2. Although the healthcare provider identified in this data item is responsible for managing the patient's treatment, it may not necessarily be where the treatment is actually conducted. For example, where the treatment has been sub-contracted to another healthcare provider.
3. For OPR ds, the Organisation Code (Code of Provider) is that of the organisation receiving the referral. If the provider is a Local Health Board/Trust, use the 3 character Local Health Board/Trust code with 2 zeros placed in the 4th and 5th character position.
4. For Referral to Treatment Times (Combined), use the 3 character Local Health Board/Trust code.

Format:

For Patient Level Data Sets (APC, EAL, OP, CC, OPR): -

5 character alpha-numeric Local Health Board/Trust Code with 2 zeros placed in the 4th and 5th character position.

For Aggregate Data Collections (*DATS*, *RTT (Combined)* and *RTT-PTR*, *PP01W*): -
3 character alpha numeric Local Health Board/Trust Code

Value	Meaning
XAABB	The organisation code for the provider

Default codes:

Value	Meaning	Valid From	Valid To
89997	Non-UK provider where no organisation code has been issued	1 st April 2004	
89999	Non-NHS UK provider where no organisation code has been requested and issued	1 st April 2002	

See [ORGANISATION CODE](#)

Organisation Code (LHB Area of Residence)

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 st April 1999	
EAL ds	1 st April 1999	
OP ds	1 st April 1999	
RTT	1 st April 2007	31 st August 2011
PP01W		
OPR ds	1 st July 2008	
EDDS	1 st April 1999	
CRTT	1 st June 2009	31 st August 2011
Angiogram	1st December 2008	1 st April 2010
RTT (Combined)	1st September 2011	

The Local Health Board where the patient is a resident, identified via the NHS Postcode Directory. This ensures that the Local Health Board can receive information about the care given to its residents.

Format: 3 character alpha-numeric

Value	Meaning	Valid From	Valid To
NAN	The code of the LHB. Codes for Welsh LHBs are listed in Appendix C [3(A)].	N/A	N/A
X98	Not applicable e.g. for overseas visitors	1 st April 1996	

Note: For English Residents treated in Wales, use the Organisation Code of the Primary Care Trust (PCT) of Residence.

Referring Organisation Code

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 st April 1999	
EAL ds	1 st April 1999	
OP ds	1 st April 1999	
OPR ds	1 st July 2008	
EDDS	1 st April 2009	
CRTT	1 st April 2009	31 st August 2011
RTT (Combined)	1 st September 2011	

The code of the organisation of the General Medical Practitioner (GMP), General Dental Practitioner (GDP) and Consultant or Independent Nurse making the referral. This information is essential for managing contracts which are based on patterns of referral.

Where a five character Organisation Code is used, it should be left justified and padded with a space.

Default codes:

Format: 6 character alpha-numeric

Value	Meaning	Valid From	Valid To
X99998	Organisation code not applicable	1 st May 1998	
X99999	Organisation code not known	1 st May 1998	20 th January 2002

For Referral to Treatment Times (Combined):-

For the RTT (Combined) return, this data item should only be used to capture the 3 character Organisation Code (Code of Provider) when a tertiary referral takes place from one secondary care organisation to another **for Cardiac patients only** – i.e. Treatment Function Code 170 (Cardiothoracic Surgery) or 320 (Cardiology). In all other cases, 'X98' should be submitted.

The 'receiving' organisation is responsible for submitting RTT (Combined) data for any Cardiac tertiary referrals they have received from another organisation.

See [ORGANISATION CODE](#)

Note: Emergency patients referred via NHS Direct will require the data item **Method of Admission** to have the value **27** ('Via NHS Direct Services').

Return Date

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
DT Waiting Times		
RTT	1 st April 2007	31 st August 2011
PP01W		
RTT-PTR	1 st September 2008	30 th September 2009
CRTT	1 st April 2009	31 st August 2011
Angiograms	1st December 2008	1 st April 2010
RTT (Combined)	1st September 2011	

This relates to the date on which the list is measured, that is, last day of the month to which the return relates. This is also known as the census date.

Format: 8 numeric digits in the format: - cccyymmdd

Stage of Pathway

This data item is / was included in the following data sets / collections between the dates shown:

Along an entire patient pathway, 'Stage of Pathway' is used to identify the point at which a patient is currently waiting in respect of their overall diagnosis and treatment.

Whilst in the majority of patient pathways patients move from one stage to the next in sequence, there is no expectation that this must always be the case. Changes in clinical practice may introduce more variation over time. Therefore, these stages are not intended to be seen in chronological order only, as patients may commence their pathway at any one of the stages listed below.

Format: 1 digit numeric

Stage of the Pathway	Stage of the Pathway
1	Waiting for a new outpatient appointment. A new Outpatient Appointment may come from any referral source. A patient will be at Stage 1 only once.
2	Waiting for a diagnostic or Allied Health Professional (AHP) test, intervention or result. For relevant diagnostic and AHP services, see Treatment Function Code .
3	Waiting for a follow-up outpatient appointment or waiting for a decision following: 1) An outpatient appointment. 2) A diagnostic or AHP intervention result. 3) Or where the patient is waiting and the stage is uncertain/unknown.
4	Waiting for an admitted diagnostic or therapeutic intervention (i.e. treatment) only.
9	Not applicable – e.g. closed pathway.

See [Diagnostic Intervention](#)

See [Therapeutic Intervention](#)

See [Treatment Function Code](#)

Treatment Function Code

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 st April 1999	
OP ds	1 st April 1999	
EAL ds	1 st April 1999	
CC ds	1 st April 2007	
OPR ds	1 st July 2008	
RTT (Combined)	1st September 2011	

(This data item was formerly known as 'Consultant Specialty Function Code' with the new title being implemented from 15th May 2006)

This is the specialty under which the patient is treated. This may either be the same as the specialty function recorded as the consultant's main specialty or a different specialty function which will be the consultant's interest specialty function. Note that both the main specialty function and the interest specialty function should be based on one of the Royal College specialties.

Notes

- For the Outpatient Referrals Data Set this is the specialty under which the patient is intended to be treated.
- For Referral to Treatment Times (RTT) (Combined):

Diagnostic Services

- o For pre-consultant referrals to a diagnostic service specified in the table below, a 'pseudo' Treatment Function Code of 998 (Diagnostic Services) should be used.
- o Following a consultant referral, the wait for a patient referred to any diagnostic service should be captured using the Treatment Function Code of the referring specialty.

Allied Health Professional (AHP) Services

- o For pre-consultant referrals to an Allied Health Professional (AHP) service specified in the table below, a 'pseudo' Treatment Function Codes of 999 (Allied Health Professional Services) should be used.
- o Following a consultant referral:
 - Should clinical responsibility remain with the referring consultant, the Treatment Function Code should be that of the referring specialty.

- Should clinical responsibility for patient care transfer to an AHP service specified in the table below a Treatment Function Code of 999 should be used.

Consultant Referrals

- For consultant referrals, a 'pseudo' Treatment Function Code should not be used.
- As per current RTT rules, the Treatment Function Codes above are not to be used for the reporting of Mental Health and Learning Disabilities Referral to Treatment Times.

Diagnostic & Allied Health Professional (AHP) Services

Service	Service Sub Heading	Diagnostic or Allied Health Professional (AHP) Service
Audiology (Adult Hearing Aids)	Consultant GP	Diagnostic Service
Cardiology	Stress Test Echo Cardiogram	Diagnostic Service
Diagnostic Endoscopy	Gastroscopy Flexible Sigmoidoscopy Colonoscopy Cystoscopy Bronchoscopy	Diagnostic Service
Dietetics	Adults Paediatrics	AHP Service
Imaging	Fluoroscopy	
Neurophysiology	Electromyography Nerve conduction studies	Diagnostic Service
Occupational Therapy	Adults Paediatrics	AHP Service
Physiological measurement	Urodynamic tests Vascular technology	Diagnostic Service
Physiotherapy	Adults Paediatrics	AHP Service
Podiatry	Urgent Routine	AHP Service
Radiology – GP Referral	Barium Enema C.T. M.R.	Diagnostic Service
Radiology – Consultant Referral	Non-Obstetric Ultrasound Nuclear Medicine	Diagnostic Service
Speech & Language	Adults Paediatrics	AHP Service

Format: 3 digit numeric

See [Specialty/Specialty of Treatment Code](#)

See [Appendix A](#)

Weeks Wait

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
DT Waiting Times		
RTT	1 st April 2007	31 st August 2011
PP01W		
CRTT	1 st April 2009	31 st August 2011
Angiogram	1st December 2008	1 st April 2010
RTT (Combined)	1 st September 2011	

The time bands for reporting the waiting time counts, some values of which vary between returns developed for different purposes.

The principle for recording the time band for a weeks wait is shown below: -

For reporting purposes a weeks wait is a value of x and refers to "Over x weeks and up to x+1 weeks".

The calculation from days to weeks wait reported is Integer value of (days-1)/7 or zero, whichever is greater.

For example, to calculate the weeks wait for 277 days; use the calculation (days-1)/7: -

$(277-1)/7 = 39.428$ (equivalent to 39 weeks and 4 days). This will be recorded under the 'Over 39 weeks and up to 40 weeks (Day 274 – 280)' Time Band.

The definition for 999 is different within the RTT (Combined) and PP01W collections. In the PP01W it refers to suspensions and in RTT (Combined) it refers to patients with unknown RTT start clock date. The correct definition must be applied to the relevant return.

Diagnostic and Therapy Waiting Times & PP01W: -

The count of waiting time will start from the waiting list date and end on the census date, which is the last day of each month.

The waiting times will be reported grouped within time bands described in weeks up to 40 weeks wait. All waits beyond that will be reported in one group.

Weeks Wait	Time Band
0	Up to 1 week (up to and including 7 days)
1	Over 1 week and up to 2 weeks (day 8 to

	14)
2	Over 2 weeks and up to 3 weeks (day 15 to 21)
Etc until	
39	Over 39 weeks and up to 40 weeks (day 274 to 280)
40	Over 40 weeks (day 281 and over)
999	Suspensions (for PP01W submissions only)

Referral to Treatment Times (Combined): -

For open pathways, the length of referral to treatment time will be from the clock start date to the end of the census date, which is the last day of the month.

For closed pathways, the length of referral to treatment time will be from the clock start date to the clock stop date, which is within the reporting period.

The referral to treatment times will be reported grouped in time bands described in weeks up to 40 weeks. Over that, reporting will be in 4-week time bands up to a specified 105 weeks wait. Waits beyond that will be reported in one group. Where a Local Health Board/Trust is unable to identify a start clock dates for patients, these will be reported using a Weeks Wait value of '999'.

Weeks Wait	Time Band
0	Up to 1 week (up to and including 7 days)
1	Over 1 week and up to 2 weeks (day 8 to 14)
2	Over 2 weeks and up to 3 weeks (day 15 to 21)
Etc until	
39	Over 39 weeks and up to 40 weeks (day 274 to 280)
40	Over 40 weeks and up to 41 weeks (day 281 to 287)
41 - 44	Over 41 weeks and up to 45 weeks (day 288 to 315)
45 - 48	Over 45 weeks and up to 49 weeks (day 316 to 343)
49 - 52	Over 49 weeks and up to 53 weeks (day 344 to 371)
Etc up to	
101 - 104	Over 101 weeks and up to 105 weeks (day 708 to day 735)
105	Over 105 weeks (day 736 and over)
999	Patient with unknown RTT start clock date

See WHC (2006) 081 'Delivering a 26 week Patient Pathway' for definitions of 'waiting list date'.

Cardiac Referral to Treatment Times (Retired):-

Time waiting is the difference in between the return date and the waiting list date.

Weeks Wait	Time Band
0	Up to 1 week (up to and including 7 days)
1	Over 1 week and up to 2 weeks (day 8 to 14)
2	Over 2 weeks and up to 3 weeks (day 15 to 21)
Etc until	
39	Over 39 weeks and up to 40 weeks (day 274 to 280)
40	Over 40 weeks and up to 41 weeks (day 281 to 287)
41 - 44	Over 41 weeks and up to 45 weeks (day 288 to 315)
45 - 48	Over 45 weeks and up to 49 weeks (day 316 to 343)
49 - 52	Over 49 weeks and up to 53 weeks (day 344 to 371)
Etc up to	
101 - 104	Over 101 weeks and up to 105 weeks (day 708 to day 735)
105	Over 105 weeks (day 736 and over)
999	Patient with unknown RTT start clock date

For open pathways, the length of the pathway is measured from the date of referral to the date of the return date (end of the month). An open pathway is recorded where a patient falls within the scope of the target who has not yet reached a stop clock point at the end of the month.

For closed pathways, the length of the pathway is measured from the date of referral to the date of the stop clock point. A closed pathway is recorded where a patient who falls within the scope of the target has reached a stop clock point within the month.

Angiogram (Retired) -

The count of waiting time is the difference in weeks between the return date and the date of decision to admit, not counting periods of suspension. Refer to the current rules regarding management of suspensions.

The waiting times will be reported grouped within time bands described in weeks up to 26 weeks wait. All waits beyond that will be reported in one group.

Weeks Wait	Time Band
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0	Up to 1 week (up to and including 7 days)
1	Over 1 week and up to 2 weeks (day 8 to 14)
2	Over 2 weeks and up to 3 weeks (day 15 to 21)
<i>Etc until</i>	
26	Over 26 weeks (day 183 and over)

Changes to Terms

Diagnostic Intervention

A clinical intervention intended to diagnose a patient's disease, condition or injury.

Therapeutic Intervention

A clinical intervention intended to manage a patient's disease, condition or injury and avoid further clinical interventions.

Changes to Appendices

Appendix A – Specialty Codes For General Use (Numerical) – Local Sub-Specialty codes

To cover the previously used 4-digit codes, a LOCAL SUB-SPECIALTY CODE has been introduced and is a separate field, rather than an extension. This is a locally defined division of clinical work which may cross specialty boundaries.

Please note that where there is no appropriate agreed local sub specialty code, the digits 000 should be used.

Where the code 320 100 is used to record data under the heading Paediatric Cardiology, this information should NOT be included in data recorded under the heading Cardiology (code 320 000).

For NHS Wales, the agreed sub divisions of Specialty are:

Treatment Function Code	Local Sub Specialty Code	Valid From	Valid To
NNN Any	000 No appropriate sub-specialty 666 Assessment Unit	1 st May 1998 1 st April 2009	
160 Plastic Surgery	100 Plastic Surgery (non burns) 166 Plastic Surgery (non burns) ASSESSMENT 200 Burns Surgery 266 Burns Surgery ASSESSMENT	1 st May 1998 1 st April 2009 1 st May 1998 1 st April 2009	
170 Cardiothoracic Surgery	100 Cardiac Surgery 166 Cardiac Surgery ASSESSMENT 200 Thoracic Surgery 266 Thoracic Surgery ASSESSMENT 300 Paediatric Cardiac Surgery 366 Paediatric Cardiac Surgery ASSESSMENT	1 st May 1998 1 st April 2009 1 st May 1998 1 st April 2009 1 st May 1998 1 st April 2009	
320 Cardiology	100 Paediatric Cardiology 166 Paediatric Cardiology ASSESSMENT	1 st May 1998 1 st April 2009	
400 Neurology	100 Spinal Injuries 166 Spinal Injuries ASSESSMENT 900 Other Neurology 966 Other Neurology ASSESSMENT	1 st May 1998 1 st April 2009 1 st May 1998 1 st April 2009	

Appendix A – Specialty Codes For General Use (Numerical) – Other

900	Community Medicine
901	Occupational Medicine

950	Nursing
990	Joint Consultant Clinics
998	Diagnostic Services*
999	Allied Health Professional (AHP) Services*

Notes:

* '998' and '999' are not Treatment Function Codes. They are 'pseudo' Treatment Function Codes and are only to be used for the reporting of RTT (Combined) data for diagnostic and Allied Health Professional (AHP) services.

[See Treatment Function Code](#)
